

Return Application to: City Hall - 131 East Church Street
Lewisburg, TN 37091
(931)-359-1544

LEWISBURG FIRE DEPARTMENT

**118 Water Street
Lewisburg, TN 37091
931-359-4044**



APPLICATION FOR EMPLOYMENT

Date

Applicant Name

Position Applied

APPLICATION FOR EMPLOYMENT

THE CITY OF LEWISBURG IS AN AT WILL AND EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, SEX, COLOR, RELIGION, NATIONAL ORIGIN, AGE, DISABILITY OR VETERAN STATUS IN EMPLOYMENT OPPORTUNITIES AND BENEFITS.

Overview of hiring and employment process: This *Application* is but one part of the hiring and employment process. Other parts may include an interview, an employment examination or test, and a demonstration of an ability to perform the essential functions of the job. If you need an accommodation in order to complete any part of the hiring and employment process, please call the following number:
931-359-1544.

Prior to completing the *Application* be sure to read the JOB DESCRIPTION of the position for which you are applying. As you complete this *Application*, please bear in mind the following:

- * we reserve the right to check all information for accuracy and completeness**
- * all applications for employment are a matter of public record**
- * if you need accommodation in order to complete this *Application*, please notify the municipality**

GENERAL INFORMATION

Date: _____ **Position Desired:** _____

Are You Applying For: _____ full time _____ part time _____ seasonal

If Part Time, What Days/Hours Are You Available: _____

Have You Applied With the City Before? (circle) Yes No

Have You Been Employed By the City Before? (circle) Yes No

PERSONAL INFORMATION

Your Name: _____
Last First Middle

Social Security Number: _____ **DOB:** _____

Phone Number: Home: () _____ **Business:** () _____

Address: _____
Number Street

City State Zip Code

Do You Have A Legal Right to Work in the U.S.?: (circle) Yes No

Are You Over the Age of 18?: (circle) Yes No

Have You Ever Been Convicted of a Felony? (note: this may be relevant if job-related, but does not bar you from employment): (circle) Yes or No

If Yes, Please Explain: _____

Do you have a valid Driver's License? (circle) Yes or No
DL Number: _____

YOUR EDUCATION AND TRAINING

High School Attended: _____

	City	State
Do You Have a High School Diploma? (circle)	Yes	No

Please List Other Education You Have Received:

College/University/ Trade or Business Schools Attended	City/State	Degree Earned? ____ Type Degree	Major Area of Study
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List Other Training Received (special course, work training programs, armed forces training, etc.) _____

List Special Qualifications and Skills (licenses, skills with machines, patents or inventions, publications, etc.)

Based on the JOB DESCRIPTION of the position for which you are applying:

Are you able to perform the essential functions of the job for which you are applying, either with or without a reasonable accommodation (note: you may later be asked to demonstrate your ability to perform the essential functions)?

____ Yes, and I **will not need** reasonable accommodations in order to perform the essential functions.

____ Yes, but **I will need** reasonable accommodations in order to adequately perform the essential functions of the position: Please describe below any accommodations you will need to adequately perform the essential functions of the position:

REFERENCES

Please List three or four persons, other than relatives or former employers who have knowledge of your character and/or abilities:

Name	Mailing Address	Yrs. Known	Phone

PRIOR EMPLOYMENT RECORD

List Below All Present and Past Employment Information and/or Substantive Volunteer Work:

Name and address of current or most recent employer: _____

Phone Number () _____ Your Supervisor: _____

Your Job Title/Responsibilities: _____

Date Hired: _____ Date Left: _____

Reason For Leaving: _____

Starting Salary: _____ Ending Salary: _____

May We Contact This Employer? (circle): Yes No

PRIOR EMPLOYMENT RECORD (Continued)

Name and address of previous employer: _____	

Phone Number:()_____	Your Supervisor:_____
Your Job Title/Responsibilities: _____	

Date Hired:_____	Date Left:_____
Reason For Leaving:_____	
Starting Salary:_____ Ending Salary:_____	
May We Contact This Employer? (circle): Yes No	

Name and address of previous employer: _____	

Phone Number: ()_____	Your Supervisor:_____
Your Job Title/Responsibilities: _____	

Date Hired:_____	Date Left:_____
Reason For Leaving:_____	
Starting Salary:_____ Ending Salary:_____	
May We Contact This Employer? (circle): Yes No	

*******IMPORTANT*******

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that falsified information or significant omissions may disqualify me and my application from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I waive any right of privilege, privacy, and/or confidentiality I may have in the information provided by references or others whom I have indicated may be contacted.

Applicant Signature

Date

To Be Completed By Employer

ACCEPTANCE DATA

DEPARTMENT

JOB DESCRIPTION

EMPLOYEE NO.

SHIFT

SUPERVISOR

PHYSICAL EXAM

RATE OF PAY

START DATE

PROBATION PERIOD

DEPARTMENT HEAD APPROVAL

DATE

CITY MANAGER APPROVAL

OTHER:

IMPORTANT

******APPLICATION CHECKLIST******

Everything on this list MUST be included with your application. NO applications will be accepted without ALL supporting documents. Please contact the Human Resources Representative with the City if you have any questions.

- Application
- Photocopy of Driver License
- Photocopy of high school diploma or GED.
- Photocopy of Social Security card with correct name (as name will appear on pay-roll check.)
- Copy of any relative training certificates.
- Be sure all names, addresses, phone numbers, and zip codes are accurate and complete.

BACKGROUND INFORMATION:

NOTE: A "Yes" answer to these questions may automatically bar you from employment as a Firefighter. The nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered. You must provide a full explanation before your application will be considered. Attach separate sheet if necessary.

1. ☐ Yes ☐ No Have you **ever** been arrested for or convicted of a crime?

If "Yes", what were the charges: _____

- ☐ Yes ☐ No Convicted

Location of Court: _____

Date of Conviction: _____

2. ☐ Yes ☐ No Have you **ever** pled *Nolo Contendere* or pled *Guilty* to a crime?

If "Yes", what were the charges: _____

- ☐ Yes ☐ No Convicted

Location of Court: _____

Date of Conviction: _____

3. ☐ Yes ☐ No Have you **ever** had adjudication of guilt withheld for a crime?

If "Yes", what were the charges: _____

- ☐ Yes ☐ No Convicted

Location of Court: _____

Date: _____

4. ☐ Yes ☐ No Have you **ever** used or possessed illegal drugs?

☐ Yes ☐ No Used? Last Date: _____

☐ Yes ☐ No Sold? Last Date: _____

5. ☐ Yes ☐ No Have you **ever** left employment while under investigation?

If yes, explain: _____

6. ☐ Yes ☐ No If you are currently employed by a firefighter agency, are you now or have you ever been under internal investigation?